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DELIVER TO:

NAME: Examiner L. Chai

TELECOPY PHONE NUMBER: 571-273-3788/
703-872-9306

COMPANY: U.S. Patent Office

VERIFICATION NUMBER:

TOTAL PAGES & COVER SHEET: 2

DATE TRANSMITTED: May 18, 2005

S&J OPERATOR'S NAME: Katie Lee

TELEPHONE NUMBER: (202) 828-3631

CLIENT/CASE NUMBER: 11953.0003

FROM:

NAME: Scott D. Watkins

REQUEST MADE ON

DATE: 5/18/05

TIME: 4:05 PM

COMPLETION REQUIRED BY

DATE: 5/18/05

TIME: ASAP

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SPECIAL INSTRUCTIONS:

Serial No. 09/736,229
 Filed: December 15, 2000
 Group Art Unit 2131
 Examiner: L. Chai

In accordance with your request today, attached is a Fee Transmittal authorizing payment of the fee due for a Terminal Disclaimer to Obviate a Double Patenting Rejection Over a Prior Art

PTO/SB/17 (12-04v2)

Approved for use through 07/31/2006. OMB 0551-0032
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Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL

For FY 2005

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)
 65.00
Complete if Known

Application Number	09736,229
Filing Date	December 15, 2000
First Named Inventor	David Giroux
Examiner Name	L Chai
Art Unit	2131
Attorney Docket No.	11953.0003

METHOD OF PAYMENT (check all that apply)
 Check Credit Card Money Order None Other (please identify): _____

 Deposit Account Deposit Account Number: **19-4293** Deposit Account Name: _____

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

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FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>		<u>Fees Paid (\$)</u>
	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEESFee Description

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>

- 20 or HP = _____ x _____ = _____

Small Entity
Fee (\$) Fee (\$)
50 25

HP = highest number of total claims paid for, if greater than 20.

<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>

- 3 or HP = _____ x _____ = _____

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>

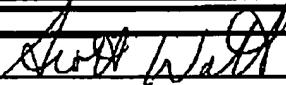
- 100 = _____ / 50 = _____ (round up to a whole number) x _____ = _____

Fees Paid (\$)**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Terminal Disclaimer

65.00**SUBMITTED BY**

<u>Signature</u>		<u>Registration No.</u> (Attorney/Agent) 36,715	<u>Telephone</u> 202-429-3000
Name (Print/Type)	Scott D. Watkins		Date May 18, 2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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